

# ftnotes

Based on Hospital Footnote Crosswalk

Footnote

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## FootnoteText

An asterisk (\*) appears in the table where data cannot be disclosed to protect personal health information due to the small number of Medicare patients (fewer than 11).

A state average was not calculated because too few hospitals in the state submitted data.

Data aren't available for reporting as the hospital is a new member of the surgical registry and didn't have an opportunity to submit any cases for the measure.

Data aren't available for the voluntary public reporting of this measure.

Data were collected during a shorter period (fewer quarters) than the maximum possible time for this measure.

Fewer than 100 patients completed the HCAHPS survey. Use these scores with caution, as the number of surveys may be too low to reliably assess hospital performance.

Medicare requires hospitals to have at least 25 qualifying cases to have their results reported. This hospital had less than 25 cases.

No data are available for publication from the hospital for this measure because there were zero central line days.

No data are available for publication from the hospital for this measure because this hospital does not have ICU locations.

No data are available from the hospital for this measure.

No data are available from the hospital for this measure.

No or very few patients were eligible for the HCAHPS survey.

Number of cases too small (fewer than 25) to report an excess readmission ratio.

Number of Medicare Patients Treated: The number of discharges the hospital treated for each MS-DRG for the current data collection period. The United States and some hospitals with zero cases.

Payment cannot be computed as there were no Medicare discharges for this Medicare Severity-Diagnosis Related Group (for the current data collection period).

Source: Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) Survey.

Suppressed for one or more quarters by CMS.

Survey results are based on less than 12 months of data.

Survey results are not available for this reporting period.

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b

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The hospital indicated that the data submitted for this measure were based on a sample of cases.

The lower limit of the confidence interval cannot be calculated if the number of observed infections equals zero.

The number of cases is too small (fewer than 10) to reliably tell how well the hospital is performing.

The number of cases is too small (fewer than 25) to reliably tell how well the hospital is performing.

The number of cases is too small to reliably tell how well a hospital is performing.

The payment and volume information is for acute care hospitals. Critical access hospitals (CAH) are not included because they are paid using another method.

There were discrepancies in the data collection process.

These measures are included in the composite measure calculations but Medicare is not reporting them at this time.

This column shows the number of patients with Original Medicare who were admitted to the hospital for heart attack, heart failure or pneumonia conditions. The hospital excludes patients with Medicare health plans (like an HMO or PPO).

This hospital is currently not submitting data for Hospital Clinical Care Measures, Hospital Outcome of Care Measures and/or the Hospital Consumer Assessment of Healthcare Providers and Services Survey.

This hospital is not included in the Hospital Readmissions Reduction Program.

This is the middle range of payments for the most typical cases treated in this geographic area for this condition or procedure.

Very few patients were eligible for the HCAHPS survey. The scores shown reflect fewer than 50 completed surveys. Use these scores with caution, as the number of surveys is small and may affect performance.